

DEPARTMENT OF HOMELAND SECURITY U.S. Customs and Border Protection

Date Printed: 11/05/2012 Subject: (b)(6)(b)(7)(C)

REPORTABLE USE OF FORCE INCIDENT DATA

SECTION A - INCIDENT IDENTIFICATION INFORMATION

Incident Numb		Inciden				Orig. SIR No.:	*****		Event No.:
(b) (7)	(E)	Mari	ne Unit	Shooting at (b)	7)(E)) (7)(E)		(b) (7)(E)
Office:	Doudos			ganization:	, + b	Reporting Office (b)(6)(b)(7			
Office of Patrol	Border		Station	Sector/Laredo Sou	ıcn				
						Telephone Nur			
	- 70 - 7070					(b)(6)(b)(7)(
Type of Incider	nt:								ate of Incident:
× Firearm			te Device	U Other	20		19:38	Monday	9/3/2012
Number of Subjects:	Number Officers		ved CBP	Other Offices / Agencies	Involved:				
1	1								
SECTION I Address: ZIP Code: 78046	B - INC	Country		ATION INFORMAT	City:	Longitu	State: rx de: (7)(E)	WI La	ounty: EBB ditude: (b) (7)(E)
CESTATIONS.	(245	US				(5)	((D) (7)(L)
Character of P									
	rsely	Popul	ated, U	Indeveloped/Open,	Outdoors		***		
Illumination:									
If Natural Illum	ination:	10.5		lumination:	h				
Daylight Environmental	Condition		NOT APP.	licable, Good lig	nting, su	oject siino	uettea		Estimated Ambient
Environmental	Condition	15.							Temperature (°F):
Dry, Windy	,								103
Additional Comments (relevant to the incident information page): On September 3, 2012, at approximately 7:38 p.m., Marine Unit reported shots fired, suspect down near the area, located on the riverbanks, approximately 200 yards upriver of the HEB Grocery store on Zapata Highway in (b) (7)(E) At approximately 7:40 p.m., the Marine Unit (b) (7)(E) cleared from the river to the U.S. riverbanks to seek cover.									
The Marine Unit was in the area of the 704 overlook assisting (b)(7)(E) agents with a group of approximately 3 subjects that crossed the river from the Mexican side to the U.S. side. The Marine Unit also attempted to assist a subject in distress near the Mexican riverbanks, when they were rocked by approximately 20 subjects on the Mexican riverbanks.									
Border Patrol Agent (BPA) (b)(6)(b)(7)(C) fired approximately 5 rounds from his Service-issued M4 Carbine at a subject on the Mexican riverbanks that was throwing rocks. The Marine Unit reported that shots were fired and a suspect was down.									
At approximately 7:41 p.m., SBPA's responded to the (b)(7)(E) area and observed a white-colored, older model Buick departing the Mexican riverbanks at Parque Viveros in Mexico. The Marine Unit reported that the subject that was shot was loaded into the Buick that departed. The Marine Unit was instructed to clear the scene and to secure their vessel at Port of Entry (b)(7)(E) Marine Unit turned their vessel and weapon used over to SBPA (b)(6)(b)(7)(C)									

Name:		1-	Γitle:		Son	ice EOD:	Duty Lo	cation EOD:		
	(b)(6)(b)(7)(C) BORDER PATROL AGE					6); (b)(7)(C)	_	(b)(7)(C)		
Duty Location:						(3/(3/(-)				
	Border Patr	col/Laredo Se	ector							
Sex:		Hand Usage:				Height:	Weight:	Age:		
(b)(6); ((b)(7)(C)	(b)(6); (b))(7)(C)			(b)(6): (b)(7)(C)	(b)(6); (b)(7)(0	(0)(6); (0)(7		
Duty Status:		Attire:		Total YEARS Law Enforcement Experience: W			Wearing	g Body Armor:		
× On Duty	Off Duty	× Uniformed	Plain Clothes	(b)(6);	(b)(7)(C)		X Ye	s 🔲 No		
Operational Act										
SECTION I	D - INVOLVE	D OFFICER	/ AGENT INJUI	RY INFO	ORMATION					
Injured:										
Yes	× No									
Describe Any I	nvolved Officer/A	gent Injuries or Of	ther Needed Information	on:						
					•					
Referred for Additional Medical Attention:										
Yes	No									
SECTION E - WEAPONS USED BY OFFICER / AGENT										
SECTION I	E - WEAPOI	NS USED BY	OFFICER / AG	ENT						
Firearm Inform		NS USED BY	OFFICER / AG	ENT						
		NS USED BY			(b)(6); (b)(7)(C)	Qualification S	Score:	(P)(5): (PXYX)(P)		
Firearm Inform	nation:		Last Qualificat		(b)(6); (b)(7)(C) Model Name/Number		Score:	Caliber:		
Firearm Inform Ownership:	nation:	Persona	Last Qualificat				Score:	Caliber: (b) (7)(E)		
Firearm Inform Ownership: Serial Number:	nation:	Persona Manufacture	Last Qualificat	tion Date:	Model Name/Number		Score:			
Firearm Inform Ownership: Serial Number: (b) (7)(E)	nation:	Persona Manufacture	Last Qualificat	tion Date:	Model Name/Number M4 Auto		Score:	(b) (7)(E)		
Firearm Inform Ownership: Serial Number: (b) (7)(E) Type: Rifle	nation:	Persona Manufacture US Milit	Last Qualificat	Round T	Model Name/Number M4 Auto ype (if Shotgun):		Score:	(b) (7)(E) Rounds Fired:		
Firearm Inform Ownership: Serial Number: (b) (7)(E) Type: Rifle Firearm Shoot Posture:	nation: X CBP	Persona Manufacture US Milit	Last Qualificat	Round T Other	Model Name/Number M4 Auto ype (if Shotgun): Orientation:		Score:	(b) (7)(E) Rounds Fired:		
Firearm Inform Ownership: Serial Number: (b) (7)(E) Type: Rifle Firearm Shoot Posture: Kneeling	nation: X CBP	Persona Manufacture US Milit	Last Qualificat	Round T Other Posture Facing	Model Name/Number M4 Auto Type (if Shotgun): Orientation: g Squarely		Score:	(b) (7)(E) Rounds Fired:		
Firearm Inform Ownership: Serial Number: (b) (7)(E) Type: Rifle Firearm Shoot Posture: Kneeling Cover Usage:	nation: X CBP	Persona Manufacture	Last Qualificat	Round T Other Posture Facing Weapon	Model Name/Number M4 Auto ype (if Shotgun): Orientation: g Squarely Grip:		Score:	(b) (7)(E) Rounds Fired:		
Firearm Inform Ownership: Serial Number: (b) (7)(E) Type: Rifle Firearm Shoot Posture: Kneeling Cover Usage: No Cover	nation: X CBP	Persona Manufacture	Last Qualificat	Round T Other Posture Facing Weapon Two-ha	Model Name/Number M4 Auto Type (if Shotgun): Orientation: g Squarely Grip: anded		Score:	(b) (7)(E) Rounds Fired:		
Firearm Inform Ownership: Serial Number: (b) (7)(E) Type: Rifle Firearm Shoot Posture: Kneeling Cover Usage: No Cover Target Elevation	nation: X CBP ting Information	Persona Manufacture	Last Qualificat	Round T Other Posture Facing Weapon Two-ha	Model Name/Number M4 Auto Type (if Shotgun): Orientation: g Squarely Grip: anded Method:		Score:	(b) (7)(E) Rounds Fired:		
Firearm Inform Ownership: Serial Number: (b) (7)(E) Type: Rifle Firearm Shoot Posture: Kneeling Cover Usage: No Cover Target Elevation At/Above E	nation: X CBP ting Information	Persona Manufacture	Last Qualificat	Round T Other Posture Facing Weapon Two-ha Aiming N	Model Name/Number M4 Auto Type (if Shotgun): Orientation: g Squarely Grip: anded Method: Aim		Score:	(b) (7)(E) Rounds Fired:		
Firearm Inform Ownership: Serial Number: (b) (7)(E) Type: Rifle Firearm Shoot Posture: Kneeling Cover Usage: No Cover Target Elevatio At/Above E Firing Mode:	ting Information	Persona Manufacture	Last Qualificat	Round T Other Posture Facing Weapon Two-ha Aiming M Sight Estimate	Model Name/Number M4 Auto Type (if Shotgun): Orientation: g Squarely Grip: anded Method: Aim d Distance (Express in	n Yards):		(b) (7)(E) Rounds Fired:		
Firearm Inform Ownership: Serial Number: (b) (7)(E) Type: Rifle Firearm Shoot Posture: Kneeling Cover Usage: No Cover Target Elevation At/Above E	ting Information	Persona Manufacture	Last Qualificat	Round T Other Posture Facing Weapon Two-ha Aiming N	Model Name/Number M4 Auto Type (if Shotgun): Orientation: g Squarely Grip: anded Method: Aim d Distance (Express in			(b) (7)(E) Rounds Fired:		
Firearm Inform Ownership: Serial Number: (b) (7)(E) Type: Rifle Firearm Shoot Posture: Kneeling Cover Usage: No Cover Target Elevatio At/Above E Firing Mode:	ting Information Eye Level	Persona Manufacture	Last Qualificat	Round T Other Posture Facing Weapon Two-ha Aiming M Sight Estimate	Model Name/Number M4 Auto Type (if Shotgun): Orientation: g Squarely Grip: anded Method: Aim d Distance (Express in	n Yards):		(b) (7)(E) Rounds Fired:		
Firearm Inform Ownership: Serial Number: (b) (7)(E) Type: Rifle Firearm Shoot Posture: Kneeling Cover Usage: No Cover Target Elevation At/Above E Firing Mode: Semi-autom Collateral Dam	ting Information Eye Level	Persona Manufacture US Milit	Last Qualificat	Round T Other Posture Facing Weapon Two-ha Aiming N Sight Estimate Minimum	Model Name/Number M4 Auto Type (if Shotgun): Orientation: g Squarely Grip: anded Method: Aim d Distance (Express in	n Yards):		(b) (7)(E) Rounds Fired:		
Firearm Inform Ownership: Serial Number: (b) (7)(E) Type: Rifle Firearm Shoot Posture: Kneeling Cover Usage: No Cover Target Elevation At/Above E Firing Mode: Semi-autom Collateral Dam	ting Information Eye Level matic age: B	Persona Manufacture US Milit	Last Qualificat	Round T Other Posture Facing Weapon Two-ha Aiming N Sight Estimate Minimum	Model Name/Number M4 Auto Type (if Shotgun): Orientation: g Squarely Grip: anded Method: Aim d Distance (Express in	n Yards):		(b) (7)(E) Rounds Fired:		
Firearm Inform Ownership: Serial Number: (b) (7)(E) Type: Rifle Firearm Shoot Posture: Kneeling Cover Usage: No Cover Target Elevation At/Above E Firing Mode: Semi-autom Collateral Dam Comments Cor	ting Information Eye Level matic age: B	Persona Manufacture US Milit	Last Qualificat	Round T Other Posture Facing Weapon Two-ha Aiming N Sight Estimate Minimum	Model Name/Number M4 Auto Type (if Shotgun): Orientation: g Squarely Grip: anded Method: Aim d Distance (Express in	n Yards):		(b) (7)(E) Rounds Fired:		
Firearm Inform Ownership: Serial Number: (b) (7)(E) Type: Rifle Firearm Shoot Posture: Kneeling Cover Usage: No Cover Target Elevation At/Above E Firing Mode: Semi-autom Collateral Dam Comments Cor	ting Information Eye Level matic age: B	Persona Manufacture US Milit	Last Qualificat	Round T Other Posture Facing Weapon Two-ha Aiming N Sight Estimate Minimum	Model Name/Number M4 Auto Type (if Shotgun): Orientation: g Squarely Grip: anded Method: Aim d Distance (Express in	n Yards):		(b) (7)(E) Rounds Fired:		
Firearm Inform Ownership: Serial Number: (b) (7)(E) Type: Rifle Firearm Shoot Posture: Kneeling Cover Usage: No Cover Target Elevation At/Above E Firing Mode: Semi-autom Collateral Dam Comments Cor	ting Information Eye Level matic age: B	Persona Manufacture US Milit	Last Qualificat	Round T Other Posture Facing Weapon Two-ha Aiming N Sight Estimate Minimum	Model Name/Number M4 Auto Type (if Shotgun): Orientation: g Squarely Grip: anded Method: Aim d Distance (Express in	n Yards):		(b) (7)(E) Rounds Fired:		
Firearm Inform Ownership: Serial Number: (b) (7)(E) Type: Rifle Firearm Shoot Posture: Kneeling Cover Usage: No Cover Target Elevation At/Above E Firing Mode: Semi-autom Collateral Dam Comments Cor	ting Information Eye Level matic age: B	Persona Manufacture US Milit	Last Qualificat	Round T Other Posture Facing Weapon Two-ha Aiming N Sight Estimate Minimum	Model Name/Number M4 Auto Type (if Shotgun): Orientation: g Squarely Grip: anded Method: Aim d Distance (Express in	n Yards):		(b) (7)(E) Rounds Fired:		
Firearm Inform Ownership: Serial Number: (b) (7)(E) Type: Rifle Firearm Shoot Posture: Kneeling Cover Usage: No Cover Target Elevation At/Above E Firing Mode: Semi-autom Collateral Dam Comments Cor	ting Information Eye Level matic age: B	Persona Manufacture US Milit	Last Qualificat	Round T Other Posture Facing Weapon Two-ha Aiming N Sight Estimate Minimum	Model Name/Number M4 Auto Type (if Shotgun): Orientation: g Squarely Grip: anded Method: Aim d Distance (Express in	n Yards):		(b) (7)(E) Rounds Fired:		

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Intermediate Device Information:		
Device:	Device Tyl	pe:
Description:		
Intermediate Device Deployment Info	mation:	
Posture:		Posture Orientation:
Cover Usage:		Weapon Grip:
Target Elevation:		Aiming Method:
Firing Mode:		Estimated Distance (Express in Yards): Minimum: 0 Maximum: 0
Did Collateral Contamination Occur?: Yes No Unknown		Time Needed for Decontamination (Express in Minutes): 0-10 11-20 More than 20
Collateral Damage: Bystander	/ Other Person(s) Hit P	Property Damaged
Other Force Information:		
Device Type:	Descriptio	n:
Comments:		
Other Force Deployment Information:	, -, -	
Posture:		Posture Orientation:
Cover Usage:		Estimated Distance (Express in Yards): Minimum: 0 Maximum: 0
Collateral Damage: Bystander	/ Other Person(s) Hit	Property Damaged
Comments Concerning Collateral Dama		
SECTION F - INVOLVED OF (Data Merged with Section E SECTION G - INVOLVED OF What Training (in addition to Basic Acad	Above by Weapon) FICER / AGENT TR	RAINING INFORMATION
Firearms Instructor Traini		
Training Recommendations:		
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Sex: Male Female X Unknown Wearing Body Armor: Yes No X Unknown FORMATION				
Male Female X Unknown Wearing Body Armor: Yes No X Unknown FORMATION				
Male Female X Unknown Wearing Body Armor: Yes No X Unknown FORMATION				
FORMATION Model Name/Number: Rounds Fired: None See Supplemental				
FORMATION : Model Name/Number: Rounds Fired: X None See Supplemental				
: Model Name/Number: Rounds Fired: X None See Supplemental				
: Model Name/Number: Rounds Fired: X None See Supplemental				
: Model Name/Number: Rounds Fired: X None See Supplemental				
: Model Name/Number: Rounds Fired: X None See Supplemental				
Model Name/Number: Rounds Fired: X None				
Model Name/Number: Rounds Fired:				
Model Name/Number: Rounds Fired: X None See Supplemental				
X None See Supplemental				
(b)(6)(b)(7)(C)				
× Yes No				
No Not Applicable				
dditional Medical Attention: Yes No Unknown				
] No [

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~	UU		v	N.	^_		141		110

Additional Comments for Incident:

At approximately 7:46 p.m., normal radio communications resumed.

At approximately 7:54 p.m., FOS (b)(6)(b)(7)(C) was notified. DPAIC (b)(6)(b)(7)(C) was notified at the same time.

At approximately 7:59 p.m., the Laredo Police Department was contacted and a unit was dispatched.

The Sector (b) (7)(E) (SET) was contacted at approximately 7:55 p.m.

PAIC (b)(6)(b)(7)(C) was contacted at approximately 7:59 p.m.

Peer Support was contacted at 7:59 p.m.

FBI was contacted and responded at 8:19 p.m.

Photographs were taken by SBPA(b)(6)(b)(7)(C)

Officer/Agent Comments:

 $_{\rm BPA}$ (b)(6)(b)(7)(C) will provide a statement at a later date. PORAC Attorney (b)(6)(b)(7)(C)

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SUPPLEMENTAL

Use this supplement to record involved Officer/Agent firearms and /or Subject weapons that are additional to those shown on the original form. Firearms or other weapons used by ADDITIONAL Involved Officers/Agents and or Subjects should be shown on ADDITIONAL FORMS submitted for those parties.

SECTION A - INCIDENT IDENTIFICATION INFORMATION

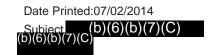
CBP Reportable Incident Number:	Original SIR Number:	Name of Primary Involved Officer / Agent:
(b) (7)(E)	(b) (7)(E)	(b)(6)(b)(7)(C)

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Officer / Agent:

(b)(6)(b)(7)(C)

DEPARTMENT OF HOMELAND SECURITY U.S. Customs and Border Protection



REPORTABLE USE OF FORCE INCIDENT DATA

SECTION A - INCIDENT IDENTIFICATION INFORMATION

SECTION A - INCIDENT II	DEIVIN IOATION IIVI	ORWATION					
Incident Number:	Incident Title:	Orig	Orig. SIR No.:			No.:	
(b) (7)(E)	Agent Involved	Shooting		(b) (7)(E	()		
Office:		Owning Organization:			Reporting (
Office of Border Pat	trol	Office of Borde	er Patrol	l/San Diego	(b)(6)(b)(7)(C)	
	Sector			Telephone	Telephone Number:		
					(b)(6)(b)	(7)(C)	
Type of Incident:				Loc	al Time / Day /	Date of Inc	ident:
🛛 Firearm 🗌 In	ntermediate Devi	ice 🗌 Other		1:0	00 PM Frid	ay 9/28,	/2012
Number of Subjects:	Number of Involved C	BP Officers/Agents:	Other Office	es / Agencies Ir	volved:		
1	1						
SECTION B - INCIDENT L	OCATION INFORM	ATION					
Address:				City:	Sta	te:	County:

Address:				City:		State:	County:		
(b) (7)(E)				Chula Vis	sta	CA	San Diego		
ZIP Code:	Country:	•	_	-	Longit	ude:	Latitude:		
91911	US				(b)	(7)(E)	(b) (7)(E)		
Character of Pre	emises:								
Urban, High	nly Populated	, Residential, Outdoors							
Illumination:									
If Natural Illumin	ation:	If Artificial Illumination:							
Daylight Not Applicable, Good lighting					_				
Environmental Conditions:				Estimated Ambient Temperature (oF):			nt Temperature (oF):		
Dry, Calm	Dry, Calm					85			

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	Name:	Title:	Se	ervice EOD:	Duty Location EOD:
	(b)(6)(b)(7)(C)	BORDER PATROL AGENT	(b)	(6); (b)(7)(C)	(b)(6); (b)(7)(C)
	Duty Location:				- -
	Office of Border Patrol/San Diego	Sector			
	Sex:	(6): (b)(7)(C)	He	eight: Weig	ht: Age: (b)(7)(C) (b)(6); (b)(7)(C)
b)	(6); (b)(7)(C)	(6); (b)(7)(C)	(b)(6); (b)(7)(C) (b)(6);	(b)(7)(C) (b)(c), (b)(7)(c)
	Duty Status: Attire:	81.70	Total YEARS Law Enforc	ement Experience	e: Wearing Body Armor:
	On Duty Off Duty Unifor	med Plain Clothes	(b)(6); (b)(7)(C) (b)(6); (b)(7)	(b)(6); (b)(7)(C)	Yes No
	Operational Activity:		h	\$6 AS	
	(b) (7)(E)				

SECTION D - INVOLVED OFFICER / AGENT INJURY INFORMATION

Injured:
Yes □ No
Describe Any Involved Officer/Agent Injuries or Other Needed Information:
Back, non life threatening
Referred for Additional Medical Attention:
Yes No

SECTION E - WEAPONS USED BY OFFICER / AGENT

Firearm Information:								
Ownership: CBP Person	al Last	Qualification Dat	e:	Qualificat	ion Score:			
Serial Number:	Manufacturer:		Model Na	ame/Number:	Cal ber:			
(b) (7)(E)	H&K			(b) (7)(E)	(b) (7)(E)			
Type:	Round	Type (if Shotgun):		Rounds Fired:	V.P			
Pistol				10				
Firearm Shooting Information:								
Posture:		Postu	re Orientatio	on:				
Standing, Other (BPA struck	by vehicle	e) Fiel (BPA	Field Interview Stance, Facing Squarely, Other (BPA struck by vehicle)					
Cover Usage:		Wear	Weapon Grip:					
No Cover		Two-	Two-handed					
Target Elevation:		Aimin	Aiming Method:					
At/Above Eye Level		Poir	Point Aim, Sight Aim					
Firing Mode:		Estim	Estimated Distance (Expressed in Yards):					
Semi-automatic		Mini	Minimum: 0 Maximum: 1					
Collateral Damage:	Bystander /	Other Person(s) Hit		Property Damaged				
Comments Concerning Collateral Damag	e:							
N/A								

UOF - Incident No.	(b) (7)(E)

SECTION F - INVOLVED OFFICER / AGENT SHOOTING INFORMATION

(Data Merged with Section E Above by Weapon)

SECTION G - INVOLVED OFFICER / AGENT TRAINING INFORMATION

What Training (in addition to Basic Academy) Assisted the Involved Officer/Agent:	
Fraining Recommendations:	

UOF - Incident No.	(b) (7)(E)

SECTION H - SUBJECT INFORMATION

Туре:	Reason (Animal):	Description of Animal:			
Person Animal	Defense Euthanize				
Name (Last, First, Middle):		-	Sex:		
(b)(6)(b)(7)(C)			\square Male	⊠ Female	Unknown
DOB or Age:	Height:	Weight:	Wearing Body	Armor:	
(b)(6)(b)(7)(C)	(b)(6)(b)(7)(C)		Yes	No	Unknown
Attire:		Deceased:			
Civilian Param	military Police	Yes No			

SECTION I - SUBJECT FIREARM (AND MISC. WEAPONS) INFORMATION

Subject Other Weapon Information (NOT Firearm):		
Vehicle		

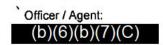
UOF - Incident No (D) (7)(E)

SECTION I-A - FORCE / WEAPON(S) USED ON SUBJECT

Weapon: H&K P2000SK (b) (7)(E)	Officer/Agent: (b)(6)(b)(7)(C)
Subject: (b)(6)(b)(7)(C)	
Effective at Stopping Immediate Threat:	Yes No
Comments:	
Did Weapon or Device Function Properly / Perform As Expected?:	☑Yes ☐No ☐Not Applicable
Comments:	
Subject Injured: Yes No Unknown	Referred for Additional Medical Attention: Yes No Unknown

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ADDITIONAL COMMENTS		
Incident Description:		
Pending update on completion of investigative reports.	(b) (7)(E)	
Agent Comments:		
Subject Comments:		
Pending update of completion of investigative reports.	(b) (7)(E)	
(b) (7)(E)		



DEPARTMENT OF HOMELAND SECURITY U.S. Customs and Border Protection

Date Printed: 10/31/2012

Subject: (b)(6)(b)(7)(C)

REPORTABLE USE OF FORCE INCIDENT DATA

	Incident Title:		Orig.	SIR No.:	Event No.:
(b) $(7)(E)$	Shots Fired	east of (b) (7)(E)		(b) (7)(E)	(b) (7)(E)
Office:	Owning Or	ganization:	Repo	rting Official:	
Office of Bord	er Tucson	Sector/Nogales St	ation (o)(6)(b)(7)(C)	
Patrol	1		Telep	hone Number:	111
				b)(6)(b)(7)(C)	
Type of Incident:				Local Time /	Day / Date of Incident:
	Intermediate Device	Other			Wednesday 10/10/2012
	per of Involved CBP	Other Offices / Agencies	Involved:		
Subjects: Office	ers/Agents:	,			
1 1					
		14,44			
	IOIDENT I OO	TION INFORMAT	1011		
	ICIDENT LOCA	ATION INFORMAT	Contracted	Icura	I Courte
Address:			City:	State:	County:
ZIP Code:	Icamatan		Nogales	Longitude:	Latitude:
21P Code: 85621	Country: US			(b) (7)(E)	(b) (7)(E)
				(~/ (. /(=/	() () () ()
Character of Premise			20 D 2		5 20 20 20 20 20 20 20 20 20 20 20 20 20
	rately Populat	ed, Residential,	Outdoors		
Illumination:					
If Natural Illumination					
Night		Lights, Vehicle He	eadlights, Dar	k, Poor lightin	
Environmental Condi	tions:				Estimated Ambient
					Temperature (^O F):
Dry Calm Dec	ort				80
Dry, Calm, Des	ert				
		lant information page):			
Additional Comments	(relevant to the incid	lent information page): (6)(b)(7)(C) was re	sponding to c	amera traffic ne	ear (b) (7)(E)
Additional Comments On October 10,	(relevant to the incid	(6)(b)(7)(C) was re			
Additional Comments On October 10, in Nogales, Ar throwing rocks	(relevant to the incidence 2012, BPA (b) izona.	(6)(b)(7)(C) was re)(7)(E) 5)(b)(7)(C)shot wit	h his Department	ear (b)(7)(E) Subjects in Mexico bega t-issued handgun, hittin
Additional Comments On October 10, in Nogales, Ar throwing rocks one subject in	(relevant to the incid 2012, BPA (b) izona. at agents in Mexico.	(6)(b)(7)(C) was re)(7)(E) 5)(b)(7)(C)shot wit		
Additional Comments On October 10, in Nogales, Ar throwing rocks	(relevant to the incid 2012, BPA (b) izona. at agents in Mexico.	(6)(b)(7)(C) was re)(7)(E) 5)(b)(7)(C)shot wit	h his Department	
Additional Comments On October 10, in Nogales, Ar throwing rocks one subject in	(relevant to the incid 2012, BPA (b) izona. at agents in Mexico.	(6)(b)(7)(C) was re)(7)(E) 5)(b)(7)(C)shot wit	h his Department	
Additional Comments On October 10, in Nogales, Ar throwing rocks one subject in	(relevant to the incid 2012, BPA (b) izona. at agents in Mexico.	(6)(b)(7)(C) was re)(7)(E) 5)(b)(7)(C)shot wit	h his Department	
Additional Comments On October 10, in Nogales, Ar throwing rocks one subject in	(relevant to the incid 2012, BPA (b) izona. at agents in Mexico.	(6)(b)(7)(C) was re)(7)(E) 5)(b)(7)(C)shot wit	h his Department	
Additional Comments On October 10, in Nogales, Ar throwing rocks one subject in	(relevant to the incid 2012, BPA (b) izona. at agents in Mexico.	(6)(b)(7)(C) was re)(7)(E) 5)(b)(7)(C)shot wit	h his Department	
On October 10, in Nogales, Ar throwing rocks one subject in	(relevant to the incid 2012, BPA (b) izona. at agents in Mexico.	(6)(b)(7)(C) was re)(7)(E) 5)(b)(7)(C)shot wit	h his Department	
Additional Comments On October 10, in Nogales, Ar throwing rocks one subject in	(relevant to the incid 2012, BPA (b) izona. at agents in Mexico.	(6)(b)(7)(C) was re)(7)(E) 5)(b)(7)(C)shot wit	h his Department	
Additional Comments On October 10, in Nogales, Ar throwing rocks one subject in	(relevant to the incid 2012, BPA (b) izona. at agents in Mexico.	(6)(b)(7)(C) was re)(7)(E) 5)(b)(7)(C)shot wit	h his Department	

	Lillion and the		Title:					cation EOD: (b)(7)(C)
)(7)(C)		BORDER PATROL AG	JENT -			(~)(~),	(×)(×)
Duty Location:								
	or/Nogales St	_		-		Height:	Weight:	Age:
Sex: (b)(6); (k)(7)(C) (b	d Usage:	(7)(C)			(b)(6); (b)(7)(C)	(b)(6); (b)(7)((C) (b)(6); (b)(7)(C)
Duty Status:	Atti	re:			ARS Law Enforcemen	t Experience:		g Body Armor:
X On Duty	Off Duty X	Uniformed	Plain Clothes	(b)(6	(b)(7)(C)		× Ye	s No
Operational Activ	rity:							
		(= \						
	(b) (7)	(L)						8
SECTION D	- INVOLVED	OFFICER	R / AGENT INJUR	RY INFO	ORMATION			
Injured:		-27-227						
Yes	× No					3.39.9		
Describe Any Inv	olved Officer/Agen	t Injuries or C	Other Needed Informatio	n:				
								W
Referred for Add	itional Medical Atte	ntion:			- Anna Anna Anna Anna Anna Anna Anna Ann			
Yes	No							
L					.77	-		
SECTION E	- WEAPONS	USED B	Y OFFICER / AGI	ENT				
Firearm Informa	ation:							
Ownership:	× CBP	Person	nal Last Qualificati	ion Date:		Qualification So	core:	
Serial Number:	no de la constant	Manufacture						
(b) (7)(E)			EI.		Model Name/Number	:		Caliber:
		H&K	ы.		Model Name/Number P2000	:		Caliber: (b) (7)(E)
Type:			еі.	Round T		:		/
Type: Pistol			ei.	Round T	P2000 Type (if Shotgun):	:		(b) (7)(E)
Pistol	ng Information;		ет.		P2000 Type (if Shotgun):	:	40	(b) (7)(E) Rounds Fired:
Pistol Firearm Shootin Posture:	ng Information:		er.	Other	P2000 Type (if Shotgun): Orientation:	:		(b) (7)(E) Rounds Fired:
Pistol Firearm Shootin Posture: Standing	ng Information;		et.	Other Posture Side	P2000 Type (if Shotgun): Orientation: Towards	:		(b) (7)(E) Rounds Fired:
Pistol Firearm Shootin Posture: Standing Cover Usage:	ng Information:		e1.	Posture Side Weapon	P2000 Type (if Shotgun): Orientation: Towards Grip:	:		(b) (7)(E) Rounds Fired:
Pistol Firearm Shootin Posture: Standing Cover Usage: Cover Used			e1.	Posture Side Weapon Two-h	P2000 Type (if Shotgun): Orientation: Towards Grip: anded	:		(b) (7)(E) Rounds Fired:
Pistol Firearm Shootin Posture: Standing Cover Usage: Cover Used Target Elevation			e1.	Posture Side Weapon Two-h	P2000 Type (if Shotgun): Orientation: Towards Grip: anded Method:	:		(b) (7)(E) Rounds Fired:
Pistol Firearm Shootin Posture: Standing Cover Usage: Cover Used Target Elevation At/Above Ey			e1.	Posture Side Weapon Two-h Aiming N	P2000 Type (if Shotgun): Orientation: Towards Grip: anded Method: Aim			(b) (7)(E) Rounds Fired:
Pistol Firearm Shootin Posture: Standing Cover Usage: Cover Used Target Elevation At/Above Ey Firing Mode:	: e Level		e1.	Posture Side Weapon Two-h Aiming N Sight Estimate	P2000 Type (if Shotgun): Orientation: Towards Grip: anded Method: Aim ed Distance (Express in	n Yards):		(b) (7)(E) Rounds Fired: 15
Pistol Firearm Shootin Posture: Standing Cover Usage: Cover Used Target Elevation At/Above Ey Firing Mode: Semi-automa	: e Level	H&K		Posture Side Weapon Two-h Aiming N Sight Estimate Minimum	P2000 Type (if Shotgun): Orientation: Towards Grip: anded Method: Aim ed Distance (Express in the control of t		: 25	(b) (7)(E) Rounds Fired: 15
Pistol Firearm Shootin Posture: Standing Cover Usage: Cover Used Target Elevation At/Above Ey Firing Mode: Semi-automa Collateral Damas	: e Level tic ge: Bysta	H&K		Posture Side Weapon Two-h Aiming N Sight Estimate	P2000 Type (if Shotgun): Orientation: Towards Grip: anded Method: Aim ed Distance (Express in the control of t	n Yards):	: 25	(b) (7)(E) Rounds Fired: 15
Pistol Firearm Shootin Posture: Standing Cover Usage: Cover Used Target Elevation At/Above Ey Firing Mode: Semi-automa Collateral Damas	: e Level	H&K		Posture Side Weapon Two-h Aiming N Sight Estimate Minimum	P2000 Type (if Shotgun): Orientation: Towards Grip: anded Method: Aim ed Distance (Express in the control of t	n Yards):	: 25	(b) (7)(E) Rounds Fired: 15
Pistol Firearm Shootin Posture: Standing Cover Usage: Cover Used Target Elevation At/Above Ey Firing Mode: Semi-automa Collateral Damas	: e Level tic ge: Bysta	H&K		Posture Side Weapon Two-h Aiming N Sight Estimate Minimum	P2000 Type (if Shotgun): Orientation: Towards Grip: anded Method: Aim ed Distance (Express in the control of t	n Yards):	: 25	(b) (7)(E) Rounds Fired: 15
Pistol Firearm Shootin Posture: Standing Cover Usage: Cover Used Target Elevation At/Above Ey Firing Mode: Semi-automa Collateral Damas	: e Level tic ge: Bysta	H&K		Posture Side Weapon Two-h Aiming N Sight Estimate Minimum	P2000 Type (if Shotgun): Orientation: Towards Grip: anded Method: Aim ed Distance (Express in the control of t	n Yards):	: 25	(b) (7)(E) Rounds Fired: 15
Pistol Firearm Shootin Posture: Standing Cover Usage: Cover Used Target Elevation At/Above Ey Firing Mode: Semi-automa Collateral Damas	: e Level tic ge: Bysta	H&K		Posture Side Weapon Two-h Aiming N Sight Estimate Minimum	P2000 Type (if Shotgun): Orientation: Towards Grip: anded Method: Aim ed Distance (Express in the control of t	n Yards):	: 25	(b) (7)(E) Rounds Fired: 15
Pistol Firearm Shootin Posture: Standing Cover Usage: Cover Used Target Elevation At/Above Ey Firing Mode: Semi-automa Collateral Damas	: e Level tic ge: Bysta	H&K		Posture Side Weapon Two-h Aiming N Sight Estimate Minimum	P2000 Type (if Shotgun): Orientation: Towards Grip: anded Method: Aim ed Distance (Express in the control of t	n Yards):	: 25	(b) (7)(E) Rounds Fired: 15
Pistol Firearm Shootin Posture: Standing Cover Usage: Cover Used Target Elevation At/Above Ey Firing Mode: Semi-automa Collateral Damas	: e Level tic ge: Bysta	H&K		Posture Side Weapon Two-h Aiming N Sight Estimate Minimum	P2000 Type (if Shotgun): Orientation: Towards Grip: anded Method: Aim ed Distance (Express in the control of t	n Yards):	: 25	(b) (7)(E) Rounds Fired: 15
Pistol Firearm Shootin Posture: Standing Cover Usage: Cover Used Target Elevation At/Above Ey Firing Mode: Semi-automa Collateral Damas	: e Level tic ge: Bysta	H&K		Posture Side Weapon Two-h Aiming N Sight Estimate Minimum	P2000 Type (if Shotgun): Orientation: Towards Grip: anded Method: Aim ed Distance (Express in the control of t	n Yards):	: 25	(b) (7)(E) Rounds Fired: 15

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ment Sensitive Page 2 of 6

SECTION E (Continuation) - WEAPONS	OSED BY	OFFICER / AGENT	
Intermediate Device Information:	Devise Trees		
Device:	Device Type:		
Description:			
Intermediate Device Deployment Information:			-
Posture:		Posture Orientation:	
Cover Usage:		Weapon Grip:	
Target Elevation:	<u> </u>	Aiming Method:	
Firing Mode:		Estimated Distance (Express in Yal Minimum: 0	rds): Maximum: ₀
Did Collateral Contamination Occur?:		Time Needed for Decontamination	
Yes No Unknown			than 20
Collateral Damage: Bystander / Other Person(s)	Hit Prop	erty Damaged	
Comments Concerning Collateral Damage:			
Other Force Information:			
	Description:		
bevice Type.	Description.		
Comments:			
			·
Other Force Deployment Information:			· · · · · · · · · · · · · · · · · · ·
Posture:		Posture Orientation:	
Cover Usage:		Estimated Distance (Express in Ya	rds):
		Minimum:	Maximum:
Collectoral Decreases			
Collateral Damage: Bystander / Other Person(s)	Hit Prop	erty Damaged	
Comments Concerning Collateral Damage:			
SECTION F - INVOLVED OFFICER / AGE (Data Merged with Section E Above by W		TING INFORMATION	
SECTION G - INVOLVED OFFICER / AGE		WING INCODERATION	
What Training (in addition to Basic Academy) Assisted the			
Firearms Instructor Training Program	mvoived Onk	ær/Agent:	
Training Recommendations:			
-			
			·

		Reason (Animal)	ATION	Description of Anima	ıl:					
ype: × Person	Animal	Defense	Euthanize	·						
	irst, Middle):				s	ex:				
)(6)(b)(7)(0	\mathbb{C})			- 1	× Male	Fem	ale	Unknov	'n
OOB or Age:		Height:		Weight:		Vearing Bo				
b)(6)(b)(7)(C	l.	(b)(6)(b)(7)(C)		(b)(6)(b)(7)(C)	11	Yes	☐ No		× Unknov	/n
Attire:										
× Civilian	Paramilitary	Police [None	× Deceased						
ECTION	I - SUBJECT	FIREARM	(AND MISC.	WEAPONS) IN	FORMATI	ON				
irearm Infor	mation:	Unknown								
уре:			Round Type (if	Shotgun):						
			Shot [Slug Other	:					
Caliber:	Serial Number:		Manufacturer:		Model Nam	e/Number		Ro	unds Fired:	
			<u> </u>							
445:	// In- Complement				_		_			
add Firearms	(Use Supplement	al Sheet for Add	itional Suspect Fi	rearms):	× No	ne [See Su	uppleme	ntal	
				rearms):	× Noi	ne [See Su	uppleme	ntal	
	r Weapon Inform			rearms):	× Noi	ne [See Su	uppleme	ntal	
Subject Othe				rearms):	× Noi	ne	See Su	uppleme	ntal	
Subject Othe				rearms):	× Noi	ne [See Su	uppleme	ntal	
Subject Othe				rearms):	× Noi	ne [See Su	uppleme	ntal	
Subject Othe				rearms):	× Noi	ne	See Su	uppleme	ntal	
Subject Othe Rocks	r Weapon Inform	ation (<u>NOT</u> Fire	arm):		× Noi	ne	See Su	uppleme	ntal	
Subject Othe Rocks	r Weapon Inform	ation (<u>NOT</u> Fire	arm):	N SUBJECT	× Noi	ne	See Su	uppleme	ntal	
Subject Other Rocks SECTION Weapon:	r Weapon Inform	ation (<u>NOT</u> Fire	arm):	N SUBJECT Officer/Agent:		ne	See Su	uppleme	ntal	
Subject Other Rocks SECTION Weapon: P2000	r Weapon Inform	ation (<u>NOT</u> Fire	arm):	N SUBJECT Officer/Agent:	× No.	ne	See Su	uppleme	ntal	
Subject Other Rocks SECTION Veapon: P2000 Subject:	r Weapon Inform	ation (<u>NOT</u> Fire	arm):	N SUBJECT Officer/Agent:		ne	See Su	uppleme	ntal	
SECTION Veapon: P2000 Subject:	I-A - FORCE	E / WEAPON	arm):	Officer/Agent:	(b)(7)(C)	ne	See Su	uppleme	ntal	
SECTION Veapon: P2000 Subject:	I-A - FORCE	E / WEAPON	arm):	N SUBJECT Officer/Agent:	(b)(7)(C)	ne	See Su	uppleme	ntal	
SECTION Weapon: P2000 Subject:	I-A - FORCE	E / WEAPON	arm):	Officer/Agent:	(b)(7)(C)	ne	See Su	uppleme	ntal	
SECTION Weapon: P2000 Subject: Effective at S Comments:	I-A - FORCE	WEAPON Threat:	arm):	Officer/Agent: (b)(6)((b)(7)(C)			uppleme	ntal	
Subject Other Rocks SECTION Weapon: P2000 Subject: Effective at S Comments: Did Weapon of	I-A - FORCE	WEAPON Threat:	arm):	Officer/Agent: (b)(6)((b)(7)(C)	ne L		uppleme	ntal	
Subject Other Rocks SECTION Weapon: P2000 Subject: Effective at S Comments:	I-A - FORCE	WEAPON Threat:	arm):	Officer/Agent: (b)(6)((b)(7)(C)			uppleme	ntal	

ADDITIONAL COMMENTS	
	!

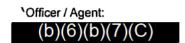
SUPPLEMENTAL

Use this supplement to record involved Officer/Agent firearms and /or Subject weapons that are additional to those shown on the original form. Firearms or other weapons used by ADDITIONAL Involved Officers/Agents and or Subjects should be shown on ADDITIONAL FORMS submitted for those parties.

SECTION A - INCIDENT IDENTIFICATION INFORMATION

CBP Reportable Incident Number:	Original SIR Number:	Name of Primary Involved Officer / Agent:
(b) (7)(E)	(b) (7)(E)	(b)(6)(b)(7)(C)

CBP Form 318-E (07/11) Law Enforcement Se



DEPARTMENT OF HOMELAND SECURITY U.S. Customs and Border Protection

Date Printed: 10/25/2012

Subject: (b)(6)(b)(7)(C)

REPORTABLE USE OF FORCE INCIDENT DATA

SECTION A - INCIDENT IDENTIFICATION INFORMATION Incident Number: Orig. SIR No.: Incident Title: Event No.: Assault on Federal Officer: Shots (b) (7)(E)(b) (7)(E)(b) (7)(E) fired by Agent Office: Owning Organization: Reporting Official: Office of Border El Paso Sector/El Paso Station (b)(6)(b)(7)(C)Patrol Telephone Number: (b)(6)(b)(7)(C)Type of Incident: Local Time / Day / Date of Incident: × Firearm X Other x Intermediate Device 18:35 Monday 6/7/2010 Number of Number of Involved CBP Other Offices / Agencies Involved: Officers/Agents: Subjects:

SECTION B - INC	IDENT LOCATION INFORMAT	TION		
Address:		City:	State:	County:
(b) (7)(E)	El Paso	тx	USA
ZIP Code:	Country:		Longitude:	Latitude:
79901	US		(b) (7)(E)	(b) (7)(E)
Character of Premises:				
Urban, Moderatel	y Populated, Commercial, Outo	doors		
Illumination:				
If Natural Illumination:	If Artificial Illumination:			
Daylight	Not Applicable, Good lig	hting		
Environmental Condition	ns:			Estimated Ambient
Danie tild medica				Temperature (^O F):
Dry, Windy				90
Additional Comments (n	elevant to the incident information page):			

Name: (b)(6)(b)(7)(C)	Title	: RDER PATROL A	GENT			ocation EOD:
Duty Location:						
El Paso Sector/El Paso	o Station					
	Hand Usage:				Height: Weigh	it: Age:
(b)(6); (b)(7)(C)	(b)(6); (b)(7)(C)			(b)(6); (b)(7)(C) (b)(6); (b)(7)(C) (b)(6); (b)(7)(
Duty Status:	Attire:			ARS Law Enforcemen	nt Experience: Weari	ng Body Armor:
➤ On Duty ☐ Off Duty	× Uniformed	Plain Clothes	(b)(6)	; (b)(7)(C)		es 🛛 No
Operational Activity:						
(b) (7)(E)						
SECTION D - INVOLVE	D OFFICER / A	AGENT INJUI	RY INFO	ORMATION		-
Injured: Yes No						
Describe Any Involved Officer/Ag	gent Injuries or Other	Needed Information	n:			
Referred for Additional Medical A	Attention:					
Yes No						
SECTION E - WEAPON	IS USED BY O	FFICER / AG	ENT			
Firearm Information:						
Ownership: X CBP	Personal	Last Qualificat	ion Date:	(b)(6); (b)(7)(C)	Qualification Score:	(b)(6); (b)(7)(C)
Serial Number:	Manufacturer:			Model Name/Number	:	Caliber:
(b) (7)(E)	H&K			P2000		(b) (7)(E)
Type:			Round T	ype (if Shotgun):		Rounds Fired:
Pistol						3
Firearm Shooting Information:						
Posture:			Posture	Orientation:		
Standing, Kneeling			Facin	g Squarely, Sid	le Towards	
Cover Usage:			Weapon	Grip:		
No Cover				anded, Gun hand	lonly	
Target Elevation:			Aiming N	flethod:		
At/Above Eye Level			Point	Aim		
Firing Mode:			Estimate	d Distance (Express in	n Yards):	
Semi-automatic			Minimun	n: 20	Maximum: 2	5
	stander / Other Perso	on(s) Hit Prope	erty Dama	ged		
Comments Concerning Collatera	_				(L)(C)(L)(7\/0\
One round struck subjection (b)(6)(b)(7)(C)	ect under left	eye, subjec	t expir	ed on scene. (2	Agent (D)(6)(D)(/)(C) arrested
l						
1						
1						
1						

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SECTION E (Continuation) - WEAPONS USED BY OFFICER / AGENT

Intermediate Device Information:		
Device:	Device Type	
ECD (Electronic Control Device)	(b) (7)(E	
Description:		
Intermediate Device Deployment Information:		
Posture:		Posture Orientation:
Standing, Kneeling		Facing Squarely, Side Towards
Cover Usage:		Weapon Grip:
No Cover		Two-handed
Target Elevation:		Aiming Method:
At/Above Eye Level		
Firing Mode:		Estimated Distance (Express in Yards):
		Minimum: 20 Maximum: 25
Did Collateral Contamination Occur?:		Time Needed for Decontamination (Express in Minutes):
		0-10 11-20 More than 20
		
Collateral Damage: Bystander / Other Person(s) Hit LPro	perty Damaged
Comments Concerning Collateral Damage:		
Other Force Information:		
Device Type:	Description:	
, ,		
Samuel and a second a second and a second an		
Comments:		
Other Force Deployment Information:		
Posture:		Posture Orientation:
Cover Usage:		Estimated Distance (Express in Yards):
		Minimum: Maximum: 0
Collateral Damage: Bystander / Other Person(s	D n	
	Hit L Pro	perty Damaged
Comments Concerning Collateral Damage:		
CECTION E INVOLVED OFFICED / ACI	ENT CHO	OTING INFORMATION
SECTION F - INVOLVED OFFICER / AGE		OTING INFORMATION
(Data Merged with Section E Above by W	(сароп)	
SECTION G - INVOLVED OFFICER / AG	ENT TRA	INING INFORMATION
What Training (in addition to Basic Academy) Assisted the		
Physical Instructor Training Program	(FN-303 &	PLS instructor)
Training Recommendations:		

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SECTION	H - SUBJEC	T INFORMAT	ION						
Type: x Person	Animal	Reason (Animal): Defense	Euthanize	Description of Animal	:				
Name (Last,	First, Middle):					Sex:			
	(b)(6)(b	o)(7)(C)				× Male	Female		Unknown
DOB or Age:		Height:		Weight:		Wearing Bo			
(b)(6)(b)(7)(C)	(b)(6)(b)(7)(C	7)	(b)(6)(b)(7)(C)		Yes	× No		Unknown
Attire:	Paramilitary	Police	None	× Deceased					
SECTION	I - SUBJEC	T FIREARM (A	AND MISC.	WEAPONS) INF	ORMAT	ION			
Firearm Info	rmation:	Unknown							
Туре:			Round Type (if	Shotgun): Slug Other:					
Caliber:	Serial Number:		Manufacturer:		Model Na	me/Number	:	Rounds	Fired:
Add Firearms	(Use Supplemer	ntal Sheet for Addition	onal Suspect Fil	rearms):	×N	one [See Supple	mental	
	er Weapon Inform	nation (<u>NOT</u> Firear	m):						
Rocks									
SECTION	I-A - FORCI	E / WEAPON(S) USED O	N SUBJECT					
Weapon: P2000				Officer/Agent: (b)(6)	(b)(7)(C	;)			
Subject:	(b)(6)(b	o)(7)(C)							
Effective at S	topping Immediat	e Threat:		× Yes	No				
Comments:									
Did Weapon	or Device Function	n Properly / Perform	n As Expected?	: Yes	No 🗌	Not Applicab	le		
Comments:									
Subject Injure	ed: Y	es No	Unknown	Referred for Ad	ditional Med	dical Attentio	n: Yes	☐ No	Unknown

	ADDITIONAL COMMENTS
Officer/Agent Comments:	
arrested subjetcs. Agent ^{©)(0)(0)(7)(0)} was	ofirearm as he utilized arrest techniques to restrain one of the simultaneously being assaulted by subjects throwing rocks as he red three rounds and one subject expired.
	-

		TIFICATION INFO		10			
		er: Original SIR N	Number:	Name of Primary Involve	d Officer / Agent:		
(b) (7)(E)		(b) (7)(E)	(b)(6)(b)(7)(C)			
ECTION C	- INVOLVED		GENT INFORMA	TION -(b)(6)(b)(7)	(C) Service EOD:	Duty Loca	ition EOD:
(b)(6)(b)(7) uty Location:)(C)		BORDER PATROL F	AGENT	(b)(6); (b)(7)(C		
	ctor/El Pas						
ex:	\(7\(0\)	Hand Usage:	(7)(0)		Height:	Weight:	Age:
o)(6); (b	(7)(C)	(b)(6); (b))(7)(C)		(b)(6); (b)(7)(C)		Coper Coper per
uty Status:		Attire:		Total YEARS Law Enfor	cement Experience:		Body Armor:
× On Duty	Off Duty	× Uniformed	Plain Clothes	(b)(6); (b)(7)(C)		Yes	× No
ECTION C	- INVOLVED	OFFICER / A	GENT INFORMA	тюн - ((b)(6)(b)(7	()(C)		
ame: b)(6)(b)(7			GENT INFORMATILE: BORD PATRL AGT	TION - (b)(6)(b)(7	Service EOD: (b)(6); (b)(7)(0		ation EOD:
ame: b)(6)(b)(7 uty Location:	(C)	,	Title:	TION - (b)(6)(b)(7	Service EOD:		
ame: b)(6)(b)(7 uty Location:		,	Title:	тюн - <mark>(b)(6)(b)(7</mark>	Service EOD:		
ame: b)(6)(b)(7 uty Location: L Paso Sec)(C)	so Station	Title: BORD PATRL AGT	TION - (b)(6)(b)(7	Service EOD: (b)(6); (b)(7)(0	C) (b)(6); (b	o)(7)(C)
ame: b)(6)(b)(7 aty Location: L Paso Sec ex: b)(6); (b	(C)	so Station Hand Usage:	Title: BORD PATRL AGT	TION - (b)(6)(b)(7	Service EOD: (b)(6); (b)(7)(0 Height: (b)(6); (b)(7)(0)	(b)(6); (b)(6); (b)(6); (b)(6); (c)(6); (c)(6)	o)(7)(C)
ame: b)(6)(b)(7 aty Location: L Paso Sector: b)(6); (b) aty Status:)(C)	oo Station Hand Usage: (b)(6); (b) Attire:	Title: BORD PATRL AGT)(7)(C)	Total YEARS Law Enfor	Service EOD: (b)(6); (b)(7)(0 Height: (D)(6); (D)(7)(C)	(b)(6); (b)(6); (b)(6); (b)(6); (c)(6); (c)(6)	Age:
ame: b)(6)(b)(7 aty Location: L Paso Sec ex: b)(6); (b aty Status: X On Duty	ctor/El Pas (7)(C) (7)(C) Off Duty	so Station Hand Usage: (b)(6); (b	Title: BORD PATRL AGT)(7)(C)		Service EOD: (b)(6); (b)(7)(0 Height: (D)(6); (D)(7)(C)	Weight: Wearing E	Age:
ame: b)(6)(b)(7 aty Location: L Paso Sec ex: b)(6); (b aty Status: X On Duty	ctor/El Pas (7)(C) (7)(C) Off Duty	oo Station Hand Usage: (b)(6); (b) Attire:	Title: BORD PATRL AGT)(7)(C)	Total YEARS Law Enfor	Service EOD: (b)(6); (b)(7)(0 Height: (D)(6); (D)(7)(C)	Weight: Wearing E	Age:
b)(6)(b)(7 aty Location: L Paso Sec ex: b)(6); (b aty Status: X On Duty	ctor/El Pas (7)(C) (7)(C) Off Duty	oo Station Hand Usage: (b)(6); (b) Attire:	Title: BORD PATRL AGT)(7)(C)	Total YEARS Law Enfor	Service EOD: (b)(6); (b)(7)(0 Height: (D)(6); (D)(7)(C)	Weight: Wearing E	Age:
b)(6)(b)(7 aty Location: L Paso Sec ex: b)(6); (b aty Status: X On Duty	ctor/El Pas (7)(C) (7)(C) Off Duty	oo Station Hand Usage: (b)(6); (b) Attire:	Title: BORD PATRL AGT)(7)(C)	Total YEARS Law Enfor	Service EOD: (b)(6); (b)(7)(0 Height: (D)(6); (D)(7)(C)	Weight: Wearing E	Age:
ame: b)(6)(b)(7 aty Location: L Paso Sec ex: b)(6); (b aty Status: X On Duty	ctor/El Pas (7)(C) (7)(C) Off Duty	oo Station Hand Usage: (b)(6); (b) Attire:	Title: BORD PATRL AGT)(7)(C)	Total YEARS Law Enfor	Service EOD: (b)(6); (b)(7)(0 Height: (D)(6); (D)(7)(C)	Weight: Wearing E	Age:
ame: b)(6)(b)(7 aty Location: L Paso Sec ex: b)(6); (b aty Status: X On Duty	ctor/El Pas (7)(C) (7)(C) Off Duty	oo Station Hand Usage: (b)(6); (b) Attire:	Title: BORD PATRL AGT)(7)(C)	Total YEARS Law Enfor	Service EOD: (b)(6); (b)(7)(0 Height: (D)(6); (D)(7)(C)	Weight: Wearing E	Age:
ame: b)(6)(b)(7 aty Location: L Paso Sector: c)(6); (b) aty Status: X On Duty Derational Acti (7)(E)	O(C) ctor/El Pas O(7)(C) Off Duty ivity:	Hand Usage: (b)(6); (b) Attire: X Uniformed	Title: BORD PATRL AGT)(7)(C) Plain Clothes	Total YEARS Law Enfor	Service EOD: (b)(6); (b)(7)(0 Height: (b)(6); (b)(7)(0) recement Experience:	Weight: Wearing E Yes	Age:
ame: b)(6)(b)(7 aty Location: L Paso Sector: D)(6); (b) aty Status: X On Duty Derational Acti (7)(E)	O(C) ctor/El Pas O(7)(C) Off Duty ivity:	Hand Usage: (b)(6); (b) Attire: X Uniformed	Title: BORD PATRL AGT)(7)(C)	Total YEARS Law Enfor	Service EOD: (b)(6); (b)(7)(0 Height: (D)(6); (D)(7)(C)	Weight: Wearing E Yes	Age:
ame: b)(6)(b)(7 aty Location: Paso Sec ex: b)(6); (b) aty Status: Con Duty Derational Acti (7)(E)	O(C) ctor/El Pas O(7)(C) Off Duty ivity:	Hand Usage: (b)(6); (b) Attire: X Uniformed	Title: BORD PATRL AGT)(7)(C) Plain Clothes	Total YEARS Law Enfor	Service EOD: (b)(6); (b)(7)(0 Height: (b)(6); (b)(7)(0) recement Experience:	Weight: Wearing E Yes	Age:
ame: b)(6)(b)(7 aty Location: L Paso Sec ex: b)(6); (b aty Status: X On Duty Derational Acti (7)(E) ECTION D ured: Yes	O(C) ctor/El Pas O(7)(C) Off Duty ivity:	Hand Usage: (b)(6); (b) Attire: X Uniformed	Title: BORD PATRL AGT (7)(C) Plain Clothes GENT INJURY IN	Total YEARS Law Enfor (b)(6); (b)(7)(C	Service EOD: (b)(6); (b)(7)(0 Height: (b)(6); (b)(7)(0) recement Experience:	Weight: Wearing E Yes	Age:
b)(6)(b)(7 uty Location: 1 Paso Sector: 2 O)(6); (b) uty Status: X On Duty perational Acti (7)(E) ECTION Designation	O(C) ctor/El Pas O(7)(C) Off Duty ivity:	Hand Usage: (b)(6); (b) Attire: X Uniformed	Title: BORD PATRL AGT)(7)(C) Plain Clothes	Total YEARS Law Enfor (b)(6); (b)(7)(C	Service EOD: (b)(6); (b)(7)(0 Height: (b)(6); (b)(7)(0) recement Experience:	Weight: Wearing E Yes	Age:
b)(6)(b)(7 aty Location: L Paso Sector: D)(6); (b) aty Status: X On Duty Decrational Action (7)(E) ECTION Decretional Tyes	O(C) ctor/El Pas O(7)(C) Off Duty ivity:	Hand Usage: (b)(6); (b) Attire: X Uniformed	Title: BORD PATRL AGT (7)(C) Plain Clothes GENT INJURY IN	Total YEARS Law Enfor (b)(6); (b)(7)(C	Service EOD: (b)(6); (b)(7)(0 Height: (b)(6); (b)(7)(0) recement Experience:	Weight: Wearing E Yes	Age:
ame: b)(6)(b)(7 aty Location: L Paso Sec ex: b)(6); (b aty Status: X On Duty Derational Acti (7)(E) ECTION D ured: Yes	O(C) ctor/El Pas O(7)(C) Off Duty ivity:	Hand Usage: (b)(6); (b) Attire: X Uniformed	Title: BORD PATRL AGT (7)(C) Plain Clothes GENT INJURY IN	Total YEARS Law Enfor (b)(6); (b)(7)(C	Service EOD: (b)(6); (b)(7)(0 Height: (b)(6); (b)(7)(0) recement Experience:	Weight: Wearing E Yes	Age:
b)(6)(b)(7 uty Location: 1 Paso Sec ex: 0)(6); (b) uty Status: × On Duty perational Acti (7)(E) ECTION D - jured: Yes escribe Any In	O(C) ctor/El Pas O(7)(C) Off Duty ivity:	Hand Usage: (b)(6); (b) Attire: Volume OFFICER / A Agent Injuries or Officers	Title: BORD PATRL AGT (7)(C) Plain Clothes GENT INJURY IN	Total YEARS Law Enfor (b)(6); (b)(7)(C	Service EOD: (b)(6); (b)(7)(0 Height: (b)(6); (b)(7)(0) recement Experience:	Weight: Wearing E Yes	Age:

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SUPPLEMENTAL Use this supplement to record involved Officer/Agent firearms and /or Subject weapons that are additional to those shown on the original form. Firearms or other weapons used by ADDITIONAL Involved Officers/Agents and or Subjects should be shown on ADDITIONAL FORMS submitted for those parties. SECTION A - INCIDENT IDENTIFICATION INFORMATION CBP Reportable Incident Number: Original SIR Number: Name of Primary Involved Officer / Agent: (b)(6)(b)(7)(C)(b) (7)(E)(b) (7)(E)(b)(6)(b)(7)(C)SECTION D - INVOLVED OFFICER / AGENT INJURY INFORMATION Injured: No Yes Describe Any Involved Officer/Agent Injuries or Other Needed Information: Referred for Additional Medical Attention: Yes No SECTION E (Continuation) - WEAPONS USED BY OFFICER / AGENT - (b)(6)(b)(7)(C) Other Force Information: Device Type: Description: Physical force w/out weapon Comments: Other Force Deployment Information: Posture: Posture Orientation: Standing Facing Squarely Estimated Distance (Express in Yards): Cover Usage: Minimum: Maximum: 1 Cover Used Collateral Damage: Bystander / Other Person(s) Hit **Property Damaged** Comments Concerning Collateral Damage:

Agent (Biglib)7/100 utilized arrest techniques and verbal commands to arrest one of the two subjects while

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simultaneously being barraged with rocks.

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SUPPLEMENTAL Use this supplement to record involved Officer/Agent firearms and /or Subject weapons that are additional to those shown on the original form. Firearms or other weapons used by ADDITIONAL Involved Officers/Agents and or Subjects should be shown on ADDITIONAL FORMS submitted for those parties. SECTION A - INCIDENT IDENTIFICATION INFORMATION CBP Reportable Incident Number: Original SIR Number: Name of Primary Involved Officer / Agent: (b)(6)(b)(7)(C)(b) (7)(E) (b) (7)(E) SECTION E (Continuation) - WEAPONS USED BY OFFICER / AGENT - (b)(6)(b)(7)(C)Other Force Information: Device Type: Description: Physical force w/out weapon Comments: Other Force Deployment Information: Posture: Posture Orientation: Standing, Kneeling Facing Squarely, Side Towards Cover Usage: Estimated Distance (Express in Yards): Minimum: Maximum: No Cover 1 Collateral Damage: Bystander / Other Person(s) Hit **Property Damaged** Comments Concerning Collateral Damage: and (b)(6)(b)(7)(C) in detaining Utilized arrest techniques, provided back up and assited agents arrested subjects. SECTION H - SUBJECT INFORMATION -(b)(6)(b)(7)(C)Type: Reason (Animal): Description of Animal: × Person Animal Defense Euthanize Name (Last, First, Middle): Sex: x Male Female Unknown b)(6); (b)(7)(C) DOB or Age: Height: Weight: Wearing Body Armor: (b)(6)(b)(7)(C)(b)(6)(b)(7)(C)Yes × No b)(6); (b)(7)(C Unknown Attire: X Civilian Paramilitary Police None Deceased SECTION H - SUBJECT INFORMATION (b)(6)(b)(7)(C) Type: Reason (Animal): Description of Animal: × Person Animal Defense Euthanize Name (Last, First, Middle): Sex: (b)(6)(b)(7)(C)× Male Female Unknown DOB or Age: Wearing Body Armor: Height: Weight:

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× Civilian Paramilitary Police

Attire:

(b)(6)(b)(7)(C)

None

Law Enforcement Sensitive

(b)(6)(b)(7)(C)

Deceased

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Unknown

X No

Yes

SUPPLEMENTAL

Use this supplement to record involved Officer/Agent firearms and /or Subject weapons that are additional to those shown on the original form. Firearms or other weapons used by ADDITIONAL Involved Officers/Agents and or Subjects should be shown on ADDITIONAL FORMS submitted for those parties. SECTION A - INCIDENT IDENTIFICATION INFORMATION CBP Reportable Incident Number: Original SIR Number: Name of Primary Involved Officer / Agent: (b)(6)(b)(7)(C)(b) (7)(E) SECTION H - SUBJECT INFORMATION -UNKNOWN. UNKNOWN Type: Reason (Animal): Description of Animal: × Person Animal Defense Euthanize Name (Last, First, Middle): Sex: (b)(6)(b)(7)(C)× Male Female Unknown DOB or Age: Weight: Height: Wearing Body Armor: (b)(6)(b)(7)(C)(b)(6)(b)(7)(C) (b)(6)(b)(7)(C)× Unknown Yes No Attire: × Civilian Paramilitary Police None Deceased SECTION I-A - OFFICER/AGENT WEAPON(S) USED ON SUBJECT -(b)(6)(b)(7)(C)Weapon: Officer/Agent: Physical force w/out weapon (b)(6)(b)(7)(C)Subject: (b)(6)(b)(7)(C)x Yes No Effective at Stopping Immediate Threat: Comments: Did Weapon or Device Function Properly / Perform As Expected?: Not Applicable Comments: Referred for Additional Medical Attention: Yes Subject Injured: No ∏N₀ Yes Unknown Unknown SECTION I-A - OFFICER/AGENT WEAPON(S) USED ON SUBJECT -(b)(6)(b)(7)(C)Weapon: Officer/Agent: (b) (7)(E)(b)(6)(b)(7)(C)Subject: (b)(6)(b)(7)(C)X Yes Effective at Stopping Immediate Threat: Nο Comments: Yes Not Applicable Did Weapon or Device Function Properly / Perform As Expected?: Comments: Subject Injured: Referred for Additional Medical Attention: Yes No Yes No Unknown Unknown

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Law Enforcement Consitive

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SUPPLEMENTAL Use this supplement to record involved Officer/Agent firearms and /or Subject weapons that are additional to those shown on the original form. Firearms or other weapons used by ADDITIONAL Involved Officers/Agents and or Subjects should be shown on ADDITIONAL FORMS submitted for those parties. SECTION A - INCIDENT IDENTIFICATION INFORMATION CBP Reportable Incident Number: Original SIR Number: Name of Primary Involved Officer / Agent: (b) (7)(E)(b) (7)(E)(b)(6)(b)(7)(C)SECTION I-A - OFFICER/AGENT WEAPON(S) USED ON SUBJECT -(b)(6)(b)(7)(C) Officer/Agent: Weapon: Physical force w/out weapon (b)(6)(b)(7)(C)Subject: (b)(6)(b)(7)(C)X Yes No Effective at Stopping Immediate Threat: Comments: Yes Not Applicable Did Weapon or Device Function Properly / Perform As Expected?: Comments: Referred for Additional Medical Attention: [Subject Injured: Yes No Unknown Yes No Unknown SECTION I-A - OFFICER/AGENT WEAPON(S) USED ON SUBJECT - UNKNOWN, UNKNOWN Weapon: Officer/Agent: P2000 (b)(6)(b)(7)(C)Subject: (b)(6)(b)(7)(C)X Yes Effective at Stopping Immediate Threat: Comments:

Yes

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Comments:

Subject Injured:

Did Weapon or Device Function Properly / Perform As Expected?:

□No

Unknown

Yes

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No

Unknown

Not Applicable

Referred for Additional Medical Attention: Yes